

more its use. The audience includes those who develop, submit or use budget impact models and committees who evaluate reimbursement submissions. With a use of Guidelines for Pharmacoeconomic Evaluations, ISPOR Guidelines and proposed BIA template (which will be published in the updated version of the Guidelines for Pharmacoeconomic Evaluations) the quality of submissions to the HIF in Serbia would be raised and the decision time could be reduced.

PHP93

THE SUSTAINABILITY OF IRISH PHARMACEUTICAL EXPENDITURE

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OBJECTIVES: The recent economic crisis has threatened the sustainability of many international economies as well as their health care systems. The objective of this paper was to quantify recent cost containment measures used to reduce Irish public pharmaceutical expenditure in light of the ongoing fiscal restraint. **METHODS:** Pharmaceutical expenditure across the EU was briefly examined using the most current OECD data. The main pharmaceutical cost containment measures recently adopted in Ireland were identified under the headings of drug prices, fees/mark-ups and coverage/co-payments with full year 2011 public savings estimated. **RESULTS:** EU pharmaceutical expenditure was estimated at €190 billion in 2010, almost one fifth of all health expenditure. At €528, Ireland spent more on pharmaceuticals than any other European country on a per capita basis and 50% more than the average across EU member states. Governments under pressure to maintain a sustainable national health system and reduce deficits, while still preserving acute care levels, are cutting pharmaceutical expenditure. Many European countries, including Ireland, have increased the use of cost containment measures including a mix of price and volume controls. Collectively, these measures were estimated to have reduced Irish public pharmaceutical expenditure by €380m in 2011. The main cost containment measures used involved addressing: 1) the ex-factory price of drugs including price cuts of up to 40% on off-patent and generic drugs leading to an estimated €200m saving, 2) pharmacy dispensing fees and mark-ups via a new dispensing fee structure and reducing both retail and wholesale mark-ups with a €100m saving, and 3) scheme coverage and patient co-payments including restricting scheme coverage for persons over 70 years and increasing the level of co-payments with savings of €80m. **CONCLUSIONS:** There use of pharmaceutical cost containment measures to decrease health expenditure is a trend that is likely to continue for some time yet.

PHP94

BASIC ATTITUDE TOWARDS HEALTH CARE RESOURCE ALLOCATION DECISION MAKING IN JAPANESE PEOPLE -UTILITARIANISM OR EGALITARIANISM?

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OBJECTIVES: Japan is now confronting budget constraints and trying to introduce economic evaluation into health care resource allocation. To clarify the basic attitude towards health care resource allocation in Japanese people, a national survey was conducted. **METHODS:** A survey was carried out in a face-to-face manner with random sampling on the 50 municipalities in Japan, adjusting for age and sex, between March and April 2013. The questionnaire consisted of two scenarios; question 1: "Imagine that there are two clinical examinations (A: less expensive with low power; B: more expensive with high power) and choose from the following two options: option 1: all subjects receive examination A and subsequently the death of 1,000 people is prevented; option 2: a half of the subjects is selected by lottery and receives examination B, preventing the death of 1,100 people as a consequence."; question 2: "Imagine that two types of diseases differing the treatment cost (A: 10 million per patient; B: 2 million per patient), and allocate 100 million yens to these diseases." **RESULTS:** Out of 1143 respondents, 601 chose the option 1 in question 1. In question 2, 217 chose the least utilitarian combination (A;8, B;10), 139 chose 2nd combination (A;6, B;20), 289 chose 3rd one (A;4, B;30), 67 chose 4th one (A;2, B;40), and 379 chose the most utilitarian option (A;0, B;50). The weak correlation was observed in the utilitarian trend and age ($r=0.29$, $p<0.01$). The utilitarian tendency to maximize the health benefit varied among respondents with different educational backgrounds. **CONCLUSIONS:** We investigated the basic attitude towards health care resource allocation in Japanese people by answering to specific scenarios, which revealed fairly extreme utilitarian selection was the most popular. This utilitarian tendency correlated with age and education. It seems that the discussion on the priority setting in health care resource allocation in Japan based on this kind of empirical data become important.

PHP95

RESOURCES SAVED BY THE INTRODUCTION OF DAY SURGERY IN THE GREEK NATIONAL HEALTH SYSTEM

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OBJECTIVES: Day surgery has been introduced in numerous health care systems and has been proved able to save resources and promote efficiency and effectiveness. The aim of this study is to estimate the savings that can be realized by the adoption of day surgery by the Greek National Health System. **METHODS:** Surgery procedures were classified according to the type of anesthesia and the post-operative care they require. The procedures identified as suitable for day surgery, according to the above criteria, were matched to the Greek Diagnostics Related Groups (DRGs). The possible savings were calculated on the basis of the marginal cost these procedures impose to hospitals when treating them as inpatient surgeries. Savings were estimated for both the social insurance (SI) and for the government budget due to the fact that SI reimburses the capital production factor of each DRG while the labor cost is funded

by the government budget. **RESULTS:** Sixty-two DRGs were identified as suitable for day cases. The majority of these were procedures of the eye (16%), the ear, nose and throat (11.3%), the myoskeletal system (9.7%), the kidney and the urinary tract (9.7%) and the female reproductive system (9.7%). The hospital marginal cost of an increase in the length of stay by one day was estimated at 563.32 euros (95%CI: 541.6–585.1). The annual savings were estimated at 93.7 million euros for the SI and when labor opportunity cost is included the amount saved exceeds 225 million. **CONCLUSIONS:** In light of the economic crisis and the continuously reduced health care budget, the health system should adopt cost-effective intervention in order to preserve a satisfactory level of health services output. As this study concludes, day surgery can save a great amount of resources and according to the international literature can also guarantee patients' safety and satisfaction.

PHP96

CHRONIC PATIENTS' PERCEPTIONS ABOUT GENERIC MEDICINES IN GREECE: FINDINGS FROM A CROSS SECTIONAL SURVEY

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OBJECTIVES: The Greek authorities implemented mandatory generic substitution trying to expand the use of generics, due to reasons of cost-containment. However, Greece lacks a strong, established generics culture. This study aims to investigate chronic patients' perceptions on generics in Greece. **METHODS:** We carried out a cross-sectional study among 1600 patients from four chronic illness groups (HTN, Diabetes, COPD and Alzheimer mild to moderate stage). Logistic regression analysis was used to determine the factors associated with chronic patients' perceptions. **RESULTS:** Of 1600 patients, 1594 responded to the survey (99.6%). Only 67% has used generics in the past. 39.3% considers them safe, 34.3% thinks that the generics have the same quality standards as the originals and 37.3% believes that they have the same treatment outcomes. 63% expressed concern on potential adverse effects from generics. 58% argues that the drug's country of origin affects its safety. Statistical analysis revealed that generics quality has a statistical significant relationship with patient's income (OR 1.24; 95% CI 1.00–1.19), age (OR 0.99; 95% CI 0.98–1.00), gender (OR 0.73; 95% CI 0.57–0.94) and health status (OR 1.00; 95% CI 1.00–1.02) while generics effectiveness was positively related with the patient's income (OR 1.10; 95% CI 1.02–1.20), gender (OR 0.70, 95% CI 0.55–0.90) and health (OR 1.00, 95% CI 1.00–1.01). Women and the elderly are less likely to consider that the generics have the same standards as the originals. **CONCLUSIONS:** Our findings reveal that chronic patients express reservations towards generic medicines which in an extent can probably explain the low generic market share in Greece. Perceptions about generics were found significant related mostly with patients' demographic characteristic. The latter can be considered as useful information as it assists stakeholders to identify on which chronic patients groups should direct campaigns in order to encourage generic drug use as a means to control expenditures and to save resources for innovative drugs.

PHP97

ANALYSIS OF SPANISH GENERIC MEDICINES MARKET: RECOMMENDATIONS TO ENHANCE LONG-TERM SUSTAINABILITY

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OBJECTIVES: To provide an overview of the Spanish generic medicines retail market and to identify policy measures which impede its development. Finally, recommendations to increase both the efficiency of health care with regards to pharmaceuticals in general and the sustainability of the Spanish generic medicines retail market are put forwards. **METHODS:** A literature review has been carried out to explore the current situation of the Spanish generic medicines market. In addition, a survey has been developed and interviews have been conducted to validate the information obtained from the literature review. **RESULTS:** The Spanish government's focus on the price level of generic medicines in the past has decreased prices of generic medicines drastically. The current reference pricing system (since 2011) has eroded price differentials between originator and generic medicines in more than 90% of the reference groups. Differing policies at the demand-side have resulted in differing generic market shares between the autonomous communities. Policies are needed to increase both the efficiency of the health care system with regards to pharmaceuticals (e.g. electronic prescribing, prescribing by international non-proprietary name, etc.) and the sustainability of the Spanish generic medicines retail market (e.g. creating price difference between originator and generic medicines, accelerating market entrance, building and improving trust for generic medicines in patients and physicians, etc.). **CONCLUSIONS:** The low volume of generic medicines used in Spain combined with the continuous pressure on the price level of generic medicines threatens the sustainability of the generic medicines industry. The reduced price difference between originator and generic medicines tends to be an important barrier for the development of a generic medicines market. The unique experience in the Spanish market shows the importance of demand-side policies on the use of generic medicines.

PHP98

ACCEPTABILITY OF INDIRECT EVIDENCE TO SUPPORT DRUG REIMBURSEMENT IN AUSTRALIA

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OBJECTIVES: When there are no direct head-to-head trials versus an appropriate comparator, indirect comparisons are commonly performed to support a clinical claim and relative pricing. In Australia, Public Summary Documents (PSDs), reporting on the Pharmaceutical Benefits Advisory Committee's (PBAC) decision-making process relating to government reimbursement of medicines, have been published since July 2005. A review of PSDs specific to drugs where the primary claim was based on indirect evidence was undertaken to assess the success of the approach and